•								Application or Docket Number					
	PATENT A	RD											
Effective October 1, 2003								10695807					
CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER	THAN	
(Column 1) (Column 2)							TYPI	TYPE		OR	SMALL	ENTITY	
TOTAL CLAIMS			10				R/	TE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASI	C FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/0 - minus 20=		6		XS	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 - minus 3 =		9		X	X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT							+14	45=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							то	TAL		OR	TOTAL	77000	
CLAIMS AS AMENDED - PART II											OTHER		
		(Column 1)	(Colum					ALL	ENTITY	OR	SMALL ENTITY		
AMENDMENT A	11.15-	CLAIMS REMAINING		HIGH NUM	BER	PRESENT	RA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
	14/12195	AFTER AMENDMENT		PREVIO PAID		EXTRA .		.,	FEE		•	FEE	
	Total	· 10	Minus	** J)	=	xs	9=		ØÁ	X\$18=		
AME	Independent	* 3	Minus	••• C	5	<u>=</u>	X4	3=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						11/	r5=		er	+290=		
								OTAL	·		TOTAL		
							ADDIT		L	OR	ADDIT. FEE	•	
١	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST] [ADDI	
8		REMAINING AFTER		NUM PREVIO	BER	PRESENT EXTRA	RA	TE	ADDI- TIONAL		RATE	ADDI- TIONAL	
Π. N.		AMENDMENT		PAID		CAINA			FEE		_	FEE	
AMENDMENT B	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	X4	3=		OR	X86=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		+14	5=		OR	+290 <u>÷</u>		
								OTAL		l	TOTAL		
								FEE	L	OR	ADDIT. FEE		
(Column 1) (Column 2) (Column 3													
ပ		REMAINING AFTER		NUM PREVIO	BER	PRESENT EXTRA	RA	TE	ADDI- TIONAL		RATE	ADDI- TIONAL	
IEN.		AMENDMENT	ļ	PAID		LAIRA		_	FEE			FEE	
AMENDMENT C	Total	*	Minus	**		= .	X\$	9=		OR	X\$18=		
ME	Independent	*	Minus	###			X4	3=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										.000		
+145= • If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
***	ii the "Highest Nu The "Highest Nur	mber Previously Pa ober Previously Pai	aro For IN IHI	r Independ	s ress ina ent) is the	highest number	r found in	he ap	propriate bo	k in col	umn 1.		